

BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

06
31
11

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			2/2/60
CLIP E CLASSIFIER			3/1/60
FORMALITY REVIEW		551	3.14.60
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ _____ Rejected
 = _____ Allowed
 - (Through numeral) _____ Canceled
 + _____ Restricted

N _____ Non-elected
 I _____ Interference
 A _____ Appeal
 O _____ Objected

Claim	Date
1	1/1/60
2	1/1/60
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here
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